

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

INDEPENDENT VOICE FOR ILLINOIS PAC

ADDRESS (number and street) ▼

PO BOX 9891

☐ Check if different than previously reported. (ACC)

ARLINGTON

VA

22219

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00572743

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☒ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer JO MERLAU

Signature of Treasurer

JO MERLAU

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

INDEPENDENT VOICE FOR ILLINOIS PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
02 12 2015 To: M M / D D / Y Y Y Y Y Y  
06 30 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2015</span>		<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">567500.00</span>	<span style="border: 1px solid black; padding: 2px;">567500.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">567500.00</span>	<span style="border: 1px solid black; padding: 2px;">567500.00</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">60728.22</span>	<span style="border: 1px solid black; padding: 2px;">60728.22</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">506771.78</span>	<span style="border: 1px solid black; padding: 2px;">506771.78</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

INDEPENDENT VOICE FOR ILLINOIS PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 02 12 2015

To:

 M M / D D / Y Y Y Y Y  
 06 30 2015
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

567500.00

567500.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

567500.00

567500.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

567500.00

567500.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

567500.00

567500.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

567500.00

567500.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	60728.22	60728.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	60728.22	60728.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	60728.22	60728.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	60728.22	60728.22

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	567500.00	567500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	567500.00	567500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	60728.22	60728.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	60728.22	60728.22

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**INDEPENDENT VOICE FOR ILLINOIS PAC**

Full Name (Last, First, Middle Initial)

## **A. Kenneth Aldridge**

Mailing Address 844 E Rockland Rd

City State Zip Code  
 Libertyville IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Aldridge Electric

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

03 / 25 / 2015

Transaction ID : SA11AI.4105

Amount of Each Receipt this Period

10000.00

Contribution

Full Name (Last, First, Middle Initial)

## **B. John DeBlasio**

Mailing Address 1550 N State Pkwy, #A1

City State Zip Code  
 Chicago IL 60610

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GPD Charitable Trust

Occupation

Founder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

05 / 04 / 2015

Transaction ID : SA11AI.4111

Amount of Each Receipt this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

## **C. Kenneth Griffin**

Mailing Address 131 S Dearborn St

City State Zip Code  
 Chicago IL 60603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Citadel LLC

Occupation

Founder & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

06 / 24 / 2015

Transaction ID : SA11AI.4131

Amount of Each Receipt this Period

200000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

212500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 15

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**INDEPENDENT VOICE FOR ILLINOIS PAC**

Full Name (Last, First, Middle Initial)

**A. Steven Hefter**

Mailing Address 2386 Tennyson Ln

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wells Fargo

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3		2	0	1	5		

**Transaction ID : SA11AI.4113**

Amount of Each Receipt this Period

10000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Jonathon S Jacobson**

Mailing Address 14 Highfields

City

Wayland

State

MA

Zip Code

01778

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Highfields Capital Managements

Occupation

Investment Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	9		2	0	1	5		

**Transaction ID : SA11AI.4103**

Amount of Each Receipt this Period

100000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Seth A Klarman**

Mailing Address 329 Heath St

City

Chestnut Hill

State

MA

Zip Code

02467

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Baupost Group, L.L.C

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	3		2	0	1	5		

**Transaction ID : SA11AI.4101**

Amount of Each Receipt this Period

100000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

210000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**INDEPENDENT VOICE FOR ILLINOIS PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Leffell**

Mailing Address 216 E 45th St  
Ste 1101

City State Zip Code  
New York NY 10017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Portage Advisors LLC

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 01 / 2015

**Transaction ID : SA11AI.4109**

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Kenneth Merlau**

Mailing Address 1095 Fisher Lane

City State Zip Code  
Winnetka IL 60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OmniVere, LLC

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 23 / 2015

**Transaction ID : SA11AI.4137**

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Murray Energy Corporation**

Mailing Address 46226 National Rd

City State Zip Code  
St. Clairesville OH 43950

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SA11AI.4133**

Amount of Each Receipt this Period

100000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

110000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 15

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**INDEPENDENT VOICE FOR ILLINOIS PAC**

Full Name (Last, First, Middle Initial)

**A. Katheryn C Patterson**Mailing Address 65 E 55th St  
FL 19City State Zip Code  
New York NY 10022FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2015

Transaction ID : SA11AI.4107

Amount of Each Receipt this Period

25000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Marc Utay**

Mailing Address 860 Park Avenue

City State Zip Code  
New York NY 10075FEC ID number of contributing  
federal political committee.

C

Name of Employer

Clarion Capital Partners

Occupation

Private Equity

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2015

Transaction ID : SA11AI.4135

Amount of Each Receipt this Period

10000.00

Contribution

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

35000.00

**TOTAL** This Period (last page this line number only)..... ►

567500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 15

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**INDEPENDENT VOICE FOR ILLINOIS PAC**

Full Name (Last, First, Middle Initial)

**A. 3E Strategies, Inc.**

Mailing Address 4067 Grand Avenue

City Gurnee State IL Zip Code 60031

Purpose of Disbursement  
Political Strategy Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2015**Transaction ID : SB21B.4144**

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address 10156 Perkins Road, Suite 217F

City Baton Rouge State LA Zip Code 70810

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 04 / 2015**Transaction ID : SB21B.4116**

Amount of Each Disbursement this Period

97.80

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address 10156 Perkins Road, Suite 217F

City Baton Rouge State LA Zip Code 70810

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2015**Transaction ID : SB21B.4117**

Amount of Each Disbursement this Period

390.30

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10488.10

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

INDEPENDENT VOICE FOR ILLINOIS PAC

390.30

Category/  
Type

MM / DD / YYYY

195.30

Category/  
Type

937.50

Category/  
Type

Gender	Percentage (%)
Male	60.78
Female	39.22

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

INDEPENDENT VOICE FOR ILLINOIS PAC

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

637.50

MM / DD / YYYY  
03 / 18 / 2015

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

3708.03

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

2737.50

7083.03

[illegible]

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

INDEPENDENT VOICE FOR ILLINOIS PAC

Category/  
Type

2575.00

MM / DD / YYYY

Category/  
Type

2200.00

Category/  
Type

7500.00

12275.00

[illegible]

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**INDEPENDENT VOICE FOR ILLINOIS PAC**

Full Name (Last, First, Middle Initial)

**A. PKL CONSULTING, INC.**

Mailing Address PO Box 8535

City	State	Zip Code
Northfield	IL	60093

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2015

**Transaction ID : SB21B.4126**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. PKL CONSULTING, INC.**

Mailing Address PO Box 8535

City	State	Zip Code
Northfield	IL	60093

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2015

**Transaction ID : SB21B.4141**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. The Endicott Group**

Mailing Address 209 Pennsylvania Ave. SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2015

**Transaction ID : SB21B.4130**

Amount of Each Disbursement this Period

7500.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

17500.00
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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

INDEPENDENT VOICE FOR ILLINOIS PAC

5000.00

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

MM / DD / YYYY

5000.00

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

1663.69

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

11663.69

60532.92